

SKAALEN SUNSET HOME

400 NORTH MORRIS STREET

STOUGHTON 53589 Phone: (608) 873-5651

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 171

Total Licensed Bed Capacity (12/31/03): 171

Number of Residents on 12/31/03: 166

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Nonprofit Church/Corporation

Skilled

Yes

Yes

Yes

175

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		16.9	
Supp. Home Care-Personal Care	No					1 - 4 Years		43.4	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.0	More Than 4 Years		27.7	
Day Services	No	Mental Illness (Org./Psy)	28.9	65 - 74	7.8				
Respite Care	Yes	Mental Illness (Other)	4.2	75 - 84	30.7			88.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.6	85 - 94	49.4	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.2	95 & Over	9.0	Full-Time Equivalent			
Congregate Meals	No	Cancer	2.4			Nursing Staff per 100 Residents			
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	12.7	65 & Over	97.0				
Transportation	No	Cerebrovascular	10.2			RNs		6.6	
Referral Service	No	Diabetes	6.6	Gender	%	LPNs		10.7	
Other Services	No	Respiratory	6.6			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	26.5	Male	27.7	Aides, & Orderlies			
Mentally Ill	No			Female	72.3				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

## Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	1.0	144	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.6
Skilled Care	20	100.0	333	104	99.0	123	0	0.0	0	41	100.0	170	0	0.0	0	0	0.0	0	165	99.4
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	20	100.0		105	100.0		0	0.0		41	100.0		0	0.0		0	0.0		166	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	5.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.4	Bathing	0.0	83.1	16.9	166
Other Nursing Homes	1.8	Dressing	10.2	78.3	11.4	166
Acute Care Hospitals	87.2	Transferring	22.3	64.5	13.3	166
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	14.5	69.3	16.3	166
Rehabilitation Hospitals	0.0	Eating	54.8	38.0	7.2	166
Other Locations	4.1	*****				
Total Number of Admissions	219	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.4	Receiving Respiratory Care		11.4
Private Home/No Home Health	10.8	Occ/Freq. Incontinent of Bladder	53.6	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	37.5	Occ/Freq. Incontinent of Bowel	19.3	Receiving Suctioning		0.6
Other Nursing Homes	2.1			Receiving Ostomy Care		3.0
Acute Care Hospitals	10.8	Mobility		Receiving Tube Feeding		3.6
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.8	Receiving Mechanically Altered Diets		23.5
Rehabilitation Hospitals	0.0					
Other Locations	10.8	Skin Care		Other Resident Characteristics		
Deaths	27.9	With Pressure Sores	8.4	Have Advance Directives		75.9
Total Number of Discharges (Including Deaths)	240	With Rashes	9.0	Medications		
				Receiving Psychoactive Drugs		60.2

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.8	92.0	0.97	87.6	1.01	88.1	1.01	87.4	1.02
Current Residents from In-County	73.5	85.9	0.86	83.0	0.89	82.1	0.90	76.7	0.96
Admissions from In-County, Still Residing	18.3	22.1	0.83	19.7	0.93	20.1	0.91	19.6	0.93
Admissions/Average Daily Census	125.1	138.9	0.90	167.5	0.75	155.7	0.80	141.3	0.89
Discharges/Average Daily Census	137.1	139.5	0.98	166.1	0.83	155.1	0.88	142.5	0.96
Discharges To Private Residence/Average Daily Census	66.3	64.3	1.03	72.1	0.92	68.7	0.97	61.6	1.08
Residents Receiving Skilled Care	100	96.1	1.04	94.9	1.05	94.0	1.06	88.1	1.14
Residents Aged 65 and Older	97.0	96.4	1.01	91.4	1.06	92.0	1.05	87.8	1.10
Title 19 (Medicaid) Funded Residents	63.3	55.4	1.14	62.7	1.01	61.7	1.03	65.9	0.96
Private Pay Funded Residents	24.7	32.6	0.76	21.5	1.15	23.7	1.04	21.0	1.18
Developmentally Disabled Residents	0.0	0.6	0.00	0.8	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	33.1	36.2	0.92	36.1	0.92	35.8	0.93	33.6	0.99
General Medical Service Residents	26.5	24.3	1.09	22.8	1.16	23.1	1.15	20.6	1.29
Impaired ADL (Mean)	46.5	50.5	0.92	50.0	0.93	49.5	0.94	49.4	0.94
Psychological Problems	60.2	58.5	1.03	56.8	1.06	58.2	1.04	57.4	1.05
Nursing Care Required (Mean)	7.5	6.8	1.09	7.1	1.05	6.9	1.08	7.3	1.02